

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000068026

FILED
Mar 02, 2010
Secretary of State

Entity Name: CORNERSTONE DENTAL PL

Current Principal Place of Business:

4009 NORTH TAMPA RD
SUITE 6
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

PO BOX 18452
TAMPA, FL 33679

New Mailing Address:

FEI Number: 27-0931647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKLIN, KEVIN A DR
3110 W SAN MIGUEL
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FRANKLIN, KEVIN A DR
Address: 3110 W SAN MIGUEL
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEVIN A FRANKLIN

MGR

03/02/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date